

**UNITED STATES BANKRUPTCY COURT  
District of New Jersey**

In re:

Julie Lucente and Damien Tooher

Debtor(s)

Case No.: 14-29496

Chapter: 13

Judge: YBA

**AMENDMENT TO SCHEDULE D, E, F, G, H  
or LIST OF CREDITORS**

Please specify the List or Schedule(s) to be amended:

- ☐ Schedule D - Creditors holding secured claims (\$30.00 fee required\*)
- ☒ Schedule E - Creditors holding unsecured priority claims (\$30.00 fee required\*)
- ☒ Schedule F - Creditors holding unsecured claims (\$30.00 fee required\*)
- ☐ Schedule G – Executory Contracts and Unexpired Leases
- ☐ Schedule H - Codebtors
- ☐ List of Creditors (Matrix) (\$30.00 fee required\*)

<b>IMPORTANT</b> – In order to receive official notices, parties added to Schedule G or H and not previously included in Schedules D, E, F or the List of Creditors, must be added to the List of Creditors.
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The List or Schedule(s) indicated above, having been previously filed, is amended as follows:  
(List name and address of creditors being added, deleted or modified and indicate same; use separate sheet if necessary)

Advocare Medical Center at Budd Lake  
135 Route 46 Budd Lake, NJ 07828

NJ Dept. of Labor & Workforce Devel.  
Division of Employer Accounts PO Box 59 Trenton, NJ 08646-0059

One to One Female Care, PA  
111 Madison Street, Ste 305 Morristown, NJ 07960

Pediatric Urology Associates  
557 Cranbury Road, Suite 4 East Brunswick, NJ 08816

Practice Associates Medical Group  
PO Box 416457 Boston, MA 02241-0000

Stoneleigh Recovery Associates, LLC  
P.O. Box 1441 Lombard, IL 60148-0000

I certify under penalty of perjury that the above information is correct.

Dated: June 12, 2015 Debtor's Signature: /s/Julie Lucente

Dated: June 12, 2015 Debtor's Signature: /s/Damien Tooher

B6D (Official Form 6D) (12/07)

In re **Julie Lucente**  
**Damien Tooher**

Case No. **14-29496**  
(if known)

### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

☒ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Subtotal (Total of this Page) >						\$0.00	\$0.00
Total (Use only on last page) >						\$0.00	\$0.00

No continuation sheets attached

(Report also on Summary of Schedules.)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

B6E (Official Form 6E) (04/13)

In re **Julie Lucente**  
**Damien Tooher**

Case No. **14-29496**  
(If Known)

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

### TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)

☐ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$6,150\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,775\* for deposits for the purchase, lease or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☐ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

☐ **Administrative allowances under 11 U.S.C. Sec. 330**

Claims based on services rendered by the trustee, examiner, professional person, or attorney and by any paraprofessional person employed by such person as approved by the court and/or in accordance with 11 U.S.C. §§ 326, 328, 329 and 330.

*\* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.*

No continuation sheets attached

B6F (Official Form 6F) (12/07)

In re **Julie Lucente**  
**Damien Tooher**Case No. **14-29496**  
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: <b>xxx5828</b> <b>Advocare Medical Center at Budd Lake</b> <b>135 Route 46</b> <b>Budd Lake, NJ 07828</b>	<b>J</b>	DATE INCURRED: CONSIDERATION: <b>Medical Services</b> REMARKS:				<b>\$54.00</b>
ACCT #: <b>xx7950</b> <b>One to One Female Care, PA</b> <b>111 Madison Street, Ste 305</b> <b>Morristown, NJ 07960</b>	<b>J</b>	DATE INCURRED: CONSIDERATION: <b>Medical Services</b> REMARKS:				<b>\$1,771.43</b>
ACCT #: <b>Pediatric Urology Associates</b> <b>557 Cranbury Road, Suite 4</b> <b>East Brunswick, NJ 08816</b>	<b>H</b>	DATE INCURRED: <b>7/30/14</b> CONSIDERATION: <b>Medical Services</b> REMARKS:				<b>\$35.28</b>
ACCT #: <b>xxxx2628</b> <b>Practice Associates Medical Group</b> <b>PO Box 416457</b> <b>Boston, MA 02241-0000</b>	<b>J</b>	DATE INCURRED: <b>7/21/14</b> CONSIDERATION: <b>Medical Services</b> REMARKS:				<b>\$61.84</b>
ACCT #: <b>xxxx5390</b> <b>Practice Associates Medical Group</b> <b>PO Box 416457</b> <b>Boston, MA 02241-0000</b>	<b>W</b>	DATE INCURRED: <b>3/26/2014</b> CONSIDERATION: <b>Medical Services</b> REMARKS:				<b>\$195.00</b>
Subtotal >						<b>\$2,117.55</b>
Total >						<b>\$2,117.55</b>

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

No continuation sheets attached

B6 Declaration (Official Form 6 - Declaration) (12/07)

In re **Julie Lucente**  
**Damien Tooher**

Case No. **14-29496**  
(if known)

**DECLARATION CONCERNING DEBTOR'S SCHEDULES**  
**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of **5** sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date **6/12/2015**

Signature **/s/ Julie Lucente**  
**Julie Lucente**

Date **6/12/2015**

Signature **/s/ Damien Tooher**  
**Damien Tooher**

[If joint case, both spouses must sign.]